

Introducing Vocational Rehabilitation - An elephant...

Have you heard the story about the elephant and the blind men? I'm sure you have, (apparently it is based on a poem - [click here for a link to the story](#)), but I think what we understand Vocational Rehabilitation (VR) to be is a bit like that story.

So, it goes a bit like this - there were 6 blind men. Each one of them felt one part of the elephant - They were then asked to explain what they thought an elephant was like - and guess what, there were 6 different answers, all fair suggestions for the part they touched (a wall, a spear, a snake, a fan, a tree, a rope), but all radically different, so the other men weren't even sure that they were touching the same animal and they went away arguing. They were all right, but also all wrong because the whole elephant wasn't anything like each of those things.

And so it is with VR - depending on which bit you touch, experience and are involved in very much shapes

the way you think about VR and what you believe it to be. If you are totally new to the term, then that's great - hopefully you have no preconceived ideas, but if you've had contacts with medical professionals, insurers, case managers etc you may have heard the term banded about a bit, and may even have heard different definitions, and possibly even told that only certain people "do VR".

I have been at a number of events over the last few years where everyone talks about VR as if it is their thing - the physios think they do it, the OTs think they do it, the insurers think they do it, the case managers think they do it, but you'd be forgiven for thinking that they are all doing totally different things if they described what they thought it to be or who they do it for / with - although hopefully there may be a bit of overlap somewhere!

Well, let's start at the beginning:

Vocational - ...being about a person's trade or career

Rehabilitation - to restore (a person) to a normal life by training, after a period of illness...to reinstate..., to restore to a good condition or for a new purpose.

The DWP's working description from their document "Building capacity for work: A UK framework for Vocational Rehabilitation" is:

"Vocational rehabilitation is a process to overcome barriers an individual faces when accessing, remaining or returning to work following injury, illness or impairment. This process includes the procedures in place to support the individual and / or employer or others (e.g. family / carers), including help to access vocational rehabilitation and to practically manage the delivery of vocational rehabilitation."

So who does it apply to:

- those who are still employed
- those who are unable to return to their job in the same business
- those who are unemployed
- every company, organisation or business who employs staff
- support agencies

VR can be applied while someone is still at work, off sick or unemployed, it can be applied right away after they injured and is still very useful even if it is months or years after the original problem (although much harder to overcome the barriers).

There are a few issues to consider, briefly

- VR needs to be considered along with the Disability Discrimination Act and the need to make reasonable adjustments to allow someone to stay in work
- VR focuses on trying to overcome the barriers or obstacles to return to work (see "Flags: What have they got to do with Rehabilitation")
- When does VR begin? - immediately! One of the big problems we have at the moment, is there is still a belief that vocational rehabilitation for work can't start until the medical condition is cured. If it can't be cured, we have to wait to see what the best outcome is and then get started. It's not true. VR starts right away and the sooner someone is being involved and engaged with their rehabilitation the more quickly they will be back at work, and in most cases, this aids recovery too.
- What does VR include? - it can include (this is not an exhaustive list!) physical treatment or conditioning, it can include cognitive and behavioural elements, it can include ergonomics, it can include workplace policy and management, it can include external support from Disability Employment Advisors, careers counselling, retraining.
- It involves - the individual, their family / carer, health professionals in the NHS or in Occupational Health, work colleagues, company management, Job centre staff, case managers, health and safety advisors, HR managers, charities, government support agencies, private support agencies, insurers, unions, patient support groups etc.

Whichever role we play, the important thing to remember is that for the best outcome for the individual (and also usually the business) is for joined up working between all the parties involved and a coherent plan with some clear and practical targets, because no matter what we all think we can do, we only see one part of the picture, and need others to help on the bits we don't know as much about.

As with the elephant, our view isn't wrong, but it needs adding to others to make it right.

I'll be writing more articles on these topics in the future.

VR is a burgeoning area and there is no one organisation regulating its practice, but there are a few places to go for more info:

www.dwp.gov.uk

www.vocationalrehabilitationassociation.org.uk

www.hse.org.uk

If you are a health professional wanting more information then have a look at "Vocatiional Rehabilitation", written by Jain Holmes (go to "about "page) in 2007.